

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
COMMUNITY ENVIRONMENTAL SERVICES

133261

## LAND DISPOSAL INSPECTION REPORT

|  |   |
|--|---|
| Disposal Facility<br><b>Barkman Landfill</b> | Facility Address<br><b>Rd #1 Honeybrook (Rt 10)</b> |
| County<br><b>Chester</b>                     | Municipality<br><b>Honeybrook Twp</b>               |
| Proprietor's Name<br><b>Ernest Barkman</b>   | Proprietor's Address<br><b>Same</b>                 |

CC

Type Record ☐ 6

1

Identification Number **100812**

2-7

Inspection Date MO **02** DA **28** YR **72**

8-13

Reinspection Date **03** **13** **72**

14-19

|   | CMPL<br>1                           | N-CMPL<br>2                         | N/A<br>3                 |    |
|---|-------------------------------------|-------------------------------------|--------------------------|----|
| 1. ALL WEATHER ACCESS ROADS TO THE SITE FOR TWO-WAY TRAFFIC OR SEPARATE ROADS FOR ONE-WAY TRAFFIC NEGOTIABLE BY LOADED COLLECTION VEHICLES. | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 20 |
| 2. TELEPHONE OR RADIO COMMUNICATIONS ACCESSIBLE TO THE SITE.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 21 |
| 3. ADEQUATE EQUIPMENT FOR MINIMIZING FIRE HAZARDS AVAILABLE.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 22 |
| 4. ALL BUILDINGS AND EQUIPMENT PROVIDED WITH FUNCTIONAL FIRE EXTINGUISHERS.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 23 |
| 5. ACCESS LIMITED TO THOSE TIMES WHEN AN ATTENDANT IS ON DUTY.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 24 |
| A. HOURS OF OPERATION PROMINENTLY POSTED.   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 25 |
| B. SUITABLE BARRIER AND FENCING BLOCKS ACCESS TO THE SITE WHEN AN ATTENDANT IS NOT ON DUTY.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 26 |
| 6. APPROVED OPERATIONAL SAFETY PROGRAM FOLLOWED AT SITE.  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 27 |
| 7. ADEQUATE SANITARY FACILITIES PROVIDED FOR THE EMPLOYEES.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 28 |
| 8. MAINTENANCE OF DAILY OPERATIONAL RECORDS.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | 29 |
| 9. FOLLOWING OPERATIONAL PLAN ITEMS FOLLOWED AT SITE:   |                                     |                                     |                          |    |
| A. AREA TO BE FILLED  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 30 |
| B. SCHEDULE OF FILLING  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 31 |
| C. SITE PREPARATION   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 32 |
| D. SOURCE AND TYPES OF COVER MATERIAL   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 33 |
| E. SOURCE AND TYPES OF SUB-BASE   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 34 |

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|   | CMPL<br>1                           | N-CMPL<br>2                         | N/A<br>3                            |    |
|---|-------------------------------------|-------------------------------------|-------------------------------------|----|
| 10. EQUIPMENT PROVIDED FOR OPERATION OF THE SITE ADEQUATE IN SIZE AND PERFORMANCE CAPABILITY.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                     | 35 |
| 11. PROVISIONS AVAILABLE TO WEIGH AND/OR MEASURE ALL SOLID WASTE DELIVERED TO THE SITE.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | 36 |
| 12. UNLOADING AREAS CLEARLY INDICATED AND RESTRICTED TO WITHIN THIRTY FEET OF THE WORKING FACE.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | 37 |
| 13. SIZE OF THE WORKING FACE CONFINED TO AN AREA WHICH CAN EASILY BE COMPACTED AND COVERED DAILY.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | 38 |
| 14. BLOWING LITTER CONTROLLED.  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                     | 39 |
| 15. SOLID WASTE SPREAD AND COMPACTED IN LAYERS NOT EXCEEDING A DEPTH OF TWO FEET.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | 40 |
| 16. INDIVIDUAL CELLS EIGHT FEET THICK OR LESS.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | 41 |
| 17. UNIFORM LAYER OF COVER MATERIAL, COMPACTED TO A MINIMUM OF SIX INCHES, PLACED ON ALL EXPOSED SOLID WASTE AT THE END OF EACH WORKING DAY.  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 42 |
| 18. AN INTERMEDIATE LAYER OF COVER MATERIAL, COMPACTED TO A MINIMUM UNIFORM DEPTH OF ONE FOOT, PLACED ON COMPLETED LIFTS IN AREAS WHERE THERE IS CLEAR INTENTION TO PLACE ANOTHER LIFT WITHIN ONE YEAR. | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 43 |
| 19. A FINAL LAYER OF COVER MATERIAL, COMPACTED TO A MINIMUM UNIFORM DEPTH OF TWO FEET PLACED OVER THE ENTIRE SURFACE OF EACH PORTION OF THE FINAL LIFT.   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 44 |
| 20. SUITABLE STANDBY EQUIPMENT AVAILABLE TO THE SITE.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                     | 45 |
| 21. DISPOSAL OF SEWAGE SOLIDS, LIQUIDS AND HAZARDOUS WASTE HANDLED WITH THE APPROVAL OF THE DEPARTMENT OF ENVIRONMENTAL RESOURCES.  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 46 |
| 22. BULKY WASTES PROPERLY DISPOSED.   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 47 |
| 23. REGULATION BAN ON OPEN BURNING ADHERED TO AT THE SITE.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                     | 48 |
| 24. DUST CONTROLLED AT SITE.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                     | 49 |
| 25. REGULATION BAN ON SCAVENGING ADHERED TO AT THE SITE.  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                     | 50 |
| 26. SALVAGING AT SITE OCCURS IN ACCORDANCE WITH REGULATIONS.  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 51 |
| 27. SURFACE WATER IS SATISFACTORILY MANAGED AT THE SITE.  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | 52 |
| 28. FINAL SLOPES AT LEAST ONE PERCENT BUT NOT GREATER THAN FIFTEEN PERCENT OR AS APPROVED BY THE DEPARTMENT OF ENVIRONMENTAL RESOURCES.   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 53 |
| 29. SATISFACTORY VEGETATIVE GROWTH ESTABLISHED TO PREVENT EROSION OF THE FINAL SOIL COVER (Weather Permitting).   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 54 |
| 30. REGULATION BAN ON UNTREATED LEACHATE DISCHARGE TO SURFACE ADHERED TO AT SITE.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |                                     | 55 |
| 31. LEACHATE TREATMENT FACILITIES OPERATED SATISFACTORILY AT SITE.  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 56 |
| 32. AN EFFECTIVE VECTOR CONTROL PROGRAM UTILIZED AT SITE (Where Needed).  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 57 |

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YES

NO

1

2

☐☒

33. ARE HAZARDOUS WASTES RECEIVED AT THE SITE?  
(If Yes, List Types on Next Page.)

## CORRECTIVE PRIORITY PROGRAM:

The following items are in violation of state regulations and must be corrected by the next inspection.

Item 5A- Hours of operation must be posted

Item 6 & 9- No modules have yet been submitted. Failure to submit a completed phase I of the Solid waste module will necessitate legal action be taken by this office. It is suggested you call the number below & inform either myself or Mr. Lynn of the status of the module.

Item <sup>14</sup> - Fencing to control blowing litter must be erected.

Item 17- Daily cover was not placed over refuse dumped last week. This must be covered immediately.

Item 19- Final cover is still required over sections of the completed lift.

Item 22 & 26- The accumulation of junk cars & trucks must be removed.

Item 28- The slope down the back of the completed fill is too steep & must be adjusted to a maximum of 15%.

Bruce Beitzler  
SANITARIAN (Signature)

\_\_\_\_\_  
OPERATOR (Signature)

277-3210

100043

Identification Number

100812

2-7

Inspection Date

02 28 72

8-13

 1. PER DAY  
 2. PER WEEK  
 3. PER MO.  
 4. PER YEAR

## 1. TYPES OF SOLID WASTE RECEIVED

A. AGRICULTURAL WASTE

YES  
1NO  
2

TONS

☐☒☐

14-21

B. COMMERCIAL WASTE

☐☒☐

22-29

C. CONSTRUCTION AND DEMOLITION WASTE

☐☒☐

30-37

D. DOMESTIC AND HOUSEHOLD WASTE

☒☐000640☒

38-45

E. INDUSTRIAL WASTE

☐☒☐

46-53

F. PARK AND BEACH WASTE

☐☒☐

54-61

Card Code

B

1

G. PATIENT CARE INSTITUTION WASTE

☐☒☐

14-21

H. SEPTIC TANK WASTE

☐☒☐

22-29

I. SEWAGE TREATMENT PLANT AND PUMPING STATION WASTE

☐☒☐

30-37

J. STREET AND ALLEY WASTE

☐☒☐

38-45

K. TREE AND LANDSCAPING WASTE

☐☒☐

46-53

L. OTHER

☐☒☐

54-61

STATE QUANTITIES OF SOLID WASTE RECEIVED PER DAY

00000640

62-70

Card Code

C

1

## LIST TYPES OF HAZARDOUS WASTE

1. \_\_\_\_\_

CODE

TONS

☐

14-24

2. \_\_\_\_\_

☐

25-35

3. \_\_\_\_\_

☐

36-46

4. \_\_\_\_\_

☐

47-57

5. \_\_\_\_\_

☐

58-68

Card Code

D

1

6. \_\_\_\_\_

CODE

TONS

☐

14-24

7. \_\_\_\_\_

☐

25-35

8. \_\_\_\_\_

☐

47-57

9. \_\_\_\_\_

☐

58-68

10. \_\_\_\_\_

☐

58-68

100044